

Person Filing: _____
Mailing Address: _____
City, State, Zip Code: _____
Daytime / Evening Phone: _____ / _____
In this case I am a: ☐ Petitioner or a ☐ Respondent ☐ Represented by Attorney
Attorney Name: _____ Bar No.: _____
Attorney Phone: _____ Atty. Email: _____
ATLAS No. (if applicable): _____

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

Name of Petitioner

Case Number: _____

Name of Respondent

Current Judge: _____

PETITION FOR POST-DECREE MEDIATION

(File with Conciliation Services)

We **do not** agree about the custody and/or parenting-time issues involving our child(ren) but we do agree to participate in mediation. We ask for mediation of the issues, based on the following:

1. Check one box only.

☐ **After Divorce or Legal Separation:** My ex-spouse and I are already divorced or legally separated from each other and we have a disagreement about legal custody and/or parenting time of our children.

OR

☐ **After Court Order of Paternity:** Paternity has already been established by Court Order and we have a disagreement about legal custody and/or parenting-time of our children.

OR

☐ **OTHER** (Describe): _____

2. ☐ **Our Decree or Parenting Plan requires us to participate in mediation** before filing papers with the Judge. (If "yes", attach a copy of that Decree or Parenting Plan to the Petition.)

3. Check one box only. ☐ We have not participated in mediation **OR**
☐ We have participated in mediation before.

4. Describe the disagreement. Be brief and specific. (The disagreement must involve the custody and/or parenting time of your minor children):

5. Information About Other Party: Name: _____
Address: _____
City, State, Zip code: _____
Telephone Number(s): _____ / _____
Attorney (if known): _____
Date : _____

Signature of Person Submitting Petition for Mediation

NOTICE TO BOTH PARTIES: If your order is signed by the Judicial Officer, Conciliation Services will mail an "Order to Attend Mediation" to both parties. **WARNING: FAILURE TO ATTEND CARRIES A \$200 FEE.**